

## Alcoholic Beverage By The Drink Excise Tax Return

**Business Name:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Month/Year Reported:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Bus. Phone/Fax:** \_\_\_\_\_

### A. Inventory-Liquor Reporting Only

*List your inventory purchases from Licensed Wholesalers for the month*

### B. Excise Tax Reporting

1. Atlanta Whls: _____ Liters	1. Gross Liquor Sales: _____
2. Empire Distr: _____ Liters	2. Tax - 3% times Line 1: _____
3. General Whls: _____ Liters	3. Less Collection Fee - 3% of Line 2 (only on timely returns): _____
4. Georgia Crown: _____ Liters	4. Credit of Debit: _____
5. National Distr: _____ Liters	5. Penalty - 10% times Line 2-25% fraud or intent to evade: _____
6. United Distr: _____ Liters	6. Interest - 1% per month or portion thereof times Line 2: _____
7. _____ Liters	7. Total Amount Due: \$ _____
8. Total Liters Purchased: _____	8. Total Amount Paid: \$ _____
9. Total Cost of Liquor Purchased: \$ _____	

**This return and payment of the taxes collected during the month shown are due by the 20<sup>th</sup> day of the next month to avoid a late payment and interest charges.**

*I hereby certify that the statements made herein and on any supporting documents are true, correct and complete to the best of my knowledge.*

**Printed Name of Preparer:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**PLEASE MAKE A COPY FOR YOUR FILE AND RETURN THE ORIGINAL WITH YOUR PAYMENT.**

**Note: Incomplete forms will be returned to you to be fully completed.**

**Please return this form with remittance to:**

City of Dunwoody  
ATTN: Finance and Administration  
41 Perimeter Center East, Suite 250  
Dunwoody, GA 30346

**Make Checks Payable To:**

City of Dunwoody